



# **B & C MECHANICAL SERVICES<sup>LLC</sup>**

**COMMERCIAL • RESIDENTIAL  
INSTALLATION • SALES • SERVICE**

**Thank you for your interest in employment with B & C Mechanical LLC. Before you begin this application, you need to understand and consent to the following requirements:**

- **YOU WILL BE REQUIRED TO PASS A DRUG TEST.**
- **WE WILL PERFORM A COMPLETE BACKGROUND CHECK THAT WILL INCLUDE YOUR WORK EXPERIENCE, EDUCATION, CREDIT REPORT INFORMATION, AND YOUR CRIMINAL CONVICTIONS HISTORY.**
- **YOU WILL BE REQUIRED TO PROVE THAT YOU CAN LEGALLY WORK IN THIS COUNTRY BEFORE COMMENCING WORK.**
- **YOU MUST COMPLETE THIS ENTIRE APPLICATION FULLY AND HONESTLY TO BE CONSIDERED FOR EMPLOYMENT. FAILURE TO DO SO WILL DISQUALIFY YOU FROM CONSIDERATION.**

**STOP now if you are unable or unwilling to comply with these requirements.**

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**If you are willing to comply with these requirements, please fully complete the remainder of this application. You must complete the entire application to be considered for employment. Thank you.**

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's Full Name: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
Last First Middle

Soc. Security #:    -   -     Today's Date: \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

When is the best time to contact you? \_\_\_\_\_ At home? \_\_\_\_\_

Current Address: \_\_\_\_\_  
Street City State Zip

Previous Address: \_\_\_\_\_  
Street City State Zip

Are you 18 years of age or older?  Yes  No

If offered employment, can you submit proof of your legal right to work in the U.S.?  Yes  No

List any other names or social security numbers you have used or currently use and the dates you used those names.

Name	Social Security, (if different)	Dates Name/SS# Used

Position you are applying for? \_\_\_\_\_

Rate of pay expected: \_\_\_\_\_

What date can you start? \_\_\_\_\_

What category would you prefer?  Full-Time  Part-Time/ Seasonal

For which schedules are you available?  Days  Evenings  Nights  Weekends

Are you willing to work overtime?  Yes  No

Do you have a valid Driver's License?  YES  NO

Driver's License Number? \_\_\_\_\_ STATE? \_\_\_\_\_

How were you referred to our company? \_\_\_\_\_

Do you write or speak a foreign language fluently?  YES  NO

Do you wish to voluntarily identify yourself as a veteran for reporting purposes?  YES  NO

## BACKGROUND INFORMATION

**CRIMINAL CONVICTIONS:** A criminal conviction will not necessarily be a bar to employment. Factors such as the type of offense and remoteness of the offense in time will be taken into account in determining the effect on suitability for employment.

Have you ever been convicted of a crime?

- Include any felony, misdemeanor, suspended imposition of sentence, or plea of “nolo-contendere” (no contest) to any crime.
- Include any crime involving a motor vehicle, including vehicular homicide or assault.
- Include any violation for a DUI or open container/chemical test failure/possession of a controlled substance.

Yes     No

If yes, please state the circumstances with regard to each. **List all convictions completely.** (Please request additional paper if you need more space to answer this question.)

Date	City / County / State	Description of the Offense	Nature of the penalty, fine and/or imprisonment

## EDUCATION

High School: \_\_\_\_\_

City & State: \_\_\_\_\_

Circle Grade Completed:    9 10 11 12                  Diploma Received?     YES                   NO

College: \_\_\_\_\_

City & State: \_\_\_\_\_

Degree Received?     YES                   NO                  Years Completed? \_\_\_\_\_

Degree/ Major Received? \_\_\_\_\_

Technical/ Vocational School: \_\_\_\_\_

City & State: \_\_\_\_\_

Diploma/ Certification Received?     YES     NO    Years Completed? \_\_\_\_\_

Degree/ Program/ Certificate Received? \_\_\_\_\_

Other Education or Trainin: \_\_\_\_\_

City & State: \_\_\_\_\_

Diploma Received?     YES                   NO                  Years Completed? \_\_\_\_\_

Degree/ Program/ Certificate Received? \_\_\_\_\_

Please list any additional information such as licenses, professional degrees, which you consider important for the job to which you have applied \_\_\_\_\_

## EMPLOYMENT HISTORY

**NOTE:** *Since we will make every effort to contact previous employers, the correct telephone numbers of past employers are critical.*

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COMPANY NAME \_\_\_\_\_ ( ) \_\_\_\_\_  
PHONE NUMBER

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ADDRESS \_\_\_\_\_ City \_\_\_\_\_ STATE \_\_\_\_\_

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From \_\_\_\_\_ To \_\_\_\_\_

---

DATES EMPLOYED \_\_\_\_\_ JOB TITLE \_\_\_\_\_ SUPERVISOR'S NAME \_\_\_\_\_

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DUTIES \_\_\_\_\_

---

Starting \_\_\_\_\_ Ending \_\_\_\_\_

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SALARY (Per Hour/Week/Month/Year) \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_

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COMPANY NAME \_\_\_\_\_ ( ) \_\_\_\_\_  
PHONE NUMBER

---

ADDRESS \_\_\_\_\_ City \_\_\_\_\_ STATE \_\_\_\_\_

---

From \_\_\_\_\_ To \_\_\_\_\_

---

DATES EMPLOYED \_\_\_\_\_ JOB TITLE \_\_\_\_\_ SUPERVISOR'S NAME \_\_\_\_\_

---

DUTIES \_\_\_\_\_

---

Starting \_\_\_\_\_ Ending \_\_\_\_\_

---

SALARY (Per Hour/Week/Month/Year) \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_

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COMPANY NAME \_\_\_\_\_ ( ) \_\_\_\_\_  
PHONE NUMBER

---

ADDRESS \_\_\_\_\_ City \_\_\_\_\_ STATE \_\_\_\_\_

---

From \_\_\_\_\_ To \_\_\_\_\_

---

DATES EMPLOYED \_\_\_\_\_ JOB TITLE \_\_\_\_\_ SUPERVISOR'S NAME \_\_\_\_\_

---

DUTIES \_\_\_\_\_

---

Starting \_\_\_\_\_ Ending \_\_\_\_\_

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SALARY (Per Hour/Week/Month/Year) \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_

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COMPANY NAME \_\_\_\_\_ ( ) \_\_\_\_\_  
PHONE NUMBER

---

ADDRESS \_\_\_\_\_ City \_\_\_\_\_ STATE \_\_\_\_\_

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From \_\_\_\_\_ To \_\_\_\_\_

---

DATES EMPLOYED \_\_\_\_\_ JOB TITLE \_\_\_\_\_ SUPERVISOR'S NAME \_\_\_\_\_

---

DUTIES \_\_\_\_\_

---

Starting \_\_\_\_\_ Ending \_\_\_\_\_

---

SALARY (Per Hour/Week/Month/Year) \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_

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**REFERENCES**

Name: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Years Known: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_

Name: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Years Known: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_

Name: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Years Known: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_

*I understand that B & C Mechanical Services LLC, has an employment-at-will policy, in that I or B & C Mechanical Services LLC, may terminate my employment at any time, or for any reason consistent with applicable state or federal law. I understand that this application is not a contract of employment. I understand that to be employed I must be lawfully authorized to work in the United States.*

*I understand that the company will thoroughly investigate my work and personal history and verify all data given on the application, on related papers, and in interviews. This include a complete background check including but not limited to credit check, workers compensation check, motor vehicle report, reference check, verification of past employment and any other investigation as needed. I authorize all individuals, schools and firms named within to provide any information requested about me, and I release them from all liability for damage in providing this information.*

*I certify that all the statements herein are true and understand that any falsification or willful omission shall be sufficient causes for dismissal or refusal of employment.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE STOP NOW. Thank you for completing this application.**

APPLICANTS PLEASE DO NOT WRITE ON THIS PAGE

INTERVIEWED BY: \_\_\_\_\_

INTERVIEWED BY: \_\_\_\_\_

STARTING DATE: \_\_\_\_\_

RATE OF PAY: \_\_\_\_\_